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JUL 24 2006

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23409 7590 04/24/2006
MICHAEL BEST & FRIEDRICH, LLP
 100 E WISCONSIN AVENUE
 MILWAUKEE, WI 53202
 07/25/2006 DTESEM2 00000035 10662052

01 FC:1501 1400.00 OP
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| | |
|----------------------|--------------------|
| Bridget Laack | (Depositor's name) |
| <i>Bridget Laack</i> | (Signature) |
| July 21, 2006 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-----------------------|---------------------|------------------|
| 10/662,052 | 09/12/2003 | Brian Thomas Branecky | 010121-9911-00 | 8331 |

TITLE OF INVENTION: FIXED SPEED DRIVE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|------------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 07/24/2006 |
| EXAMINER | ART UNIT | | CLASS-SUBCLASS | | |
| MCLOUD, RENATA D | 2837 | | 318-807000 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 Michael Best & Friedrich
 LLP
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

A.O. Smith Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Milwaukee, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-3080 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

7/21/06

Typed or printed name Sheldon L. Wolfe

Registration No. 43,996

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